

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION
DISCLOSURE REPORT
NONCANDIDATE COMMITTEE**

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR NONCANDIDATE COMMITTEES.")

SECTION I-NONCANDIDATE COMMITTEE:

(a) Committee Name:

Aloha Petroleum, Ltd.

(b) Mailing Address:

P. O. Box 500

Honolulu, HI 96809

(c) Phone (Bus)

522-9700

(Res)

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☒ Preliminary Primary

☐ Amended

☐ Final Primary

☐ Short Form

☐ Preliminary General

☐ Final Election Period

☐ Supplemental

REPORTING PERIOD

1/1/06

through 9/8/06

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section III (Part 2) on the Second Half of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee).....	-0-	-0-
2. Cash on Hand at the Beginning of this Reporting Period.....	-0-	-0-
3. Total Receipts (From Line 11, Column A and B).....	-0-	-0-
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	-0-	-0-
5. Total Disbursements (From Line 14, Column A and B).....	-0-	-0-
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	-0-	-0-

SECTION III (Part 2)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through D Before Completing This Section)

RECEIPTS

7. Monetary Contributions of \$100 or Less.....	-0-	-0-
8. Non-Monetary Contributions of \$100 or Less.....	-0-	-0-
9. Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A).....	-0-	-0-
10. Other Receipts (Schedule D, Line 2 for Column A).....	-0-	-0-
11. Total Receipts (Add Lines 7 through 10 for Columns A and B).....	-0-	-0-

DISBURSEMENTS

12. Contributions To Candidates (Schedule B, Line 2 for Column A).....	-0-	-0-
13. Expenditures (Schedule C, Line 2 for Column A).....	-0-	-0-
14. Total Disbursements (Add Lines 12 and 13 for Columns A and B).....	-0-	-0-

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.


Committee Chairperson Signature Robert W. Fung Date 9/12/06


Treasurer Signature Thomas A. Grimes Date 9/12/06